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**\*\* CONTINUING DATA \*\*\*\*\*** *None OK*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *None OK*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
 05/31/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>jo</i> Initials <i>jo</i>	<b>STATE OR COUNTRY</b> WA	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 68	<b>INDEPENDENT CLAIMS</b> 8
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**ADDRESS**  
66060

**TITLE**  
System and method for knowledge based interior development

<b>FILING FEE RECEIVED</b> 2064	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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